

**Department of Health and Human Services
Health Care Financing Administration**

Date Issued: **December 12, 2000**

Operational Policy Letter #: 2000.130

To:	Current M+C Organizations	<u> X </u>
	Section 1876 Cost Plans	<u> X </u>
	CHPP Demonstrations	
	Evercare	<u> X </u>
	DoD (TriCare)	<u> X </u>
	SHMO I & II	<u> X </u>
	PACE	<u> </u>
	OFM Demonstrations	
	MSHO	<u> </u>
	W.P.S.	<u> </u>
	HCPPs	<u> X </u>

Subject: **Model M+C Plan Evidence of Coverage and Disclosure
Information, January 1, 2001 through December 31, 2001**

Effective Date: **January 1, 2001**

Implementation Date: **Date of Issuance**

Background:

42 CFR 422.111(a)(3) requires that "An M+C organization must disclose ... information ... at the time of enrollment and annually thereafter." HCFA believes that in order to be useful to enrollees and to meet requirements of the law and regulations, an updated Evidence of Coverage (EOC) needs to be sent to all enrollees by April 16, 2001. For members who are not enrolled on January 1, the EOC must be mailed within two weeks of the effective date of coverage.

The model EOC is attached.

NOTE: This model is written for all M+C organizations (excluding Private Fee For Service plans). All other Medicare managed care organizations and demonstrations that are required to send an EOC to their members (including PFFS plans) may base the format and organization of their EOC on this model, since it is considered by HCFA to be an acceptable format. Of course, these entities must modify the language in their respective EOCs to conform with the statutory and regulatory requirements under which they operate.

Contact: HCFA Regional Office Managed Care Staff

This OPL was prepared by the Center for Health Plans and Providers

Attachment